

UNITED STATES BANKRUPTCY COURT
District of New Jersey

In re:

Chapter: _____

Case Number: _____

Civil Number: _____

Adversary Number: _____

Bankruptcy Judge: _____

TRANSMITTAL OF DOCUMENT(S) TO: **DISTRICT COURT** **CIRCUIT COURT OF APPEALS**

The following items have been filed with our office, and are being transmitted:

| | | |
|---|---|---|
| <input type="checkbox"/> Notice of Appeal | <input type="checkbox"/> Order beingAppealed | <input type="checkbox"/> Designation of Record on Appeal |
| <input type="checkbox"/> Statement of Issues | <input type="checkbox"/> Transcript | <input type="checkbox"/> Transcript Ordered On: _____ |
| <input type="checkbox"/> Motion for Leave to Appeal | <input type="checkbox"/> Certification of Failure to File Designation | <input type="checkbox"/> Motion to Withdraw the Reference |
| <input type="checkbox"/> Other _____ | | |

If a Notice of Appeal is being transmitted:

The Notice of Appeal was filed in our office on _____ . The parties to the appeal are:

| | |
|---------------------|--------------------|
| Appellant(s): _____ | Appellee(s): _____ |
| Attorney: _____ | Attorney: _____ |
| Address: _____ | Address: _____ |
| _____ | |

Title of OrderAppealed: _____

Date Entered On Docket: _____

An appeal has not previously been filed in this case.

The following list contains information regarding all appeals previously filed in this case:

| District Court Case Number | District Court Judge Assigned | Date of Transmission of Record to District Court |
|----------------------------|-------------------------------|--|
| | | |
| | | |
| | | |

Court Clerk: Please complete the information below and return a copy of this form to _____ within 3 days.

Your Court's Case Number: _____ Judge assigned: _____

By: _____ Date: _____